Attention: Enhanced Mental Health Service Providers and Local Management Entities

${f R}$ evised Effective Date for Enhanced Services Rate Changes

The effective date for the following rate decreases that were published in the September 2008 general Medicaid bulletin has been changed from October 1, 2008, to January 1, 2009.

Service Code	Service Description	Service Unit	Current Rate	New Rate
H0020	Opioid Treatment	per event	\$ 19.17	\$ 18.74
H0040	Assertive Community Treatment Team	per event	323.98	301.35
S9484	Professional Treatment Svcs in Facility Based Crisis	per hour	18.78	17.99

The effective date for the following rate increases remains October 1, 2008.

Service Code	Service Description	Service Unit	Current Rate	New Rate
H0015	Substance Abuse (SA) Intensive Outpatient Program	per diem	\$131.93	\$148.52
H2035	SA Comprehensive Outpatient Treatment Program	per hour	45.76	51.20
H0012 HB	SA Non-Medical Community Residential Treatment	per diem	145.50	175.91
H0013	SA Medically Monitored Community Res. Treatment	per diem	265.25	272.99
H0010	Non-Hospital Medical Detoxification	per diem	325.88	367.57
H0014	Ambulatory Detoxification	per 15 min	20.43	23.99
H2011	Mobile Crisis Management	per 15 min	31.79	34.37
T1023	Diagnostic Assessment MH/SA	per event	169.06	261.13
H0035	Partial Hospitalization	per diem	121.69	149.38
H2017	Psychosocial Rehabilitation	per 15 min	2.90	3.03
H2015 HT	Community Support Team (MS/SA)	per 15 min	16.52	17.26

Fee schedules are available on DMA's website at http://www.ncdhhs.gov/dma/fee/mhfee.htm . Providers must always bill their usual and customary charges.

Rate Setting DMA, 919-855-4200